ARMY NURSE CORPS NEWSLETTER

"Ready, Caring, and Proud"

Volume 5 Issue 5 March 2004



Chief's Message



This will be my last opportunity to communicate with each of you, in this forum, before my departure as Corps Chief. I cannot adequately, in words, describe what an honor it has been for me to represent each of you over these past four years. There is no doubt in my mind that the Army Nurse Corps is the premier Nursing organization in the world and the opportunity to lead this organization is an opportunity that was not only beyond any dreams that I had as I progressed through the ranks of the ANC, but additionally will provide me with memories and friendships that I will cherish the rest of my life.

It is impossible for me to thank all the individuals who have been key in providing both COL Gustke and I the support, the professional input and the candidness we needed to move Army Nursing initiatives and agendas forward over these past four years. These individuals number literally in the hundreds, so I will not attempt to recognize each of them in this month's message.

Instead, I would like to take this opportunity to personally thank those senior leaders whom I have had contact with, almost daily, during my tenure as Corps Chief. I would like to thank COL(R) Carolyn Bulliner, COL Sharon Feeney-Jones and COL Roy Harris for the wonderful leadership they have provided in ensuring that the assignments, educational needs and professional development of our officers have been properly managed at Army Nurse Corps Branch. I would like to thank COL(R) Carol Reineck, COL Carol Jones and COL Karen Seipp, all who have been or are currently serving as Chief Nurses of MEDCOM, for their support in ensuring that the much needed communication between the Corps Chiefs office and the RMC Chief Nurses was occurring, enabling us to have two-way communication regarding a wide variety of issues critical to our day-to-day mission of providing world-wide quality Nursing care.

I would also like to thank **COL(R) Lynn Connelly** and **COL Jan Harris** for the outstanding jobs they have done at focusing on our educational programs at the AMEDD Center and School and ensuring that we continually revised curriculums to meet the everevolving role of our Army Nurse Corps.

A very special thanks to **COL Bill Hartman** and **COL Libby Bryant** for giving us the vision and the expertise to assist us in getting our ROTC mission turned around. Due to their hard work, we are projecting that we will soon be attaining our mission of 175 ROTC graduates per year. In addition, I would like to thank **COL Diane Plemenik** and **COL Ann Richardson**, at USAREC, for their outstanding leadership in continuing to recruit quality Nurses into our Army Nurse Corps family. They have done an outstanding job at bringing both new graduate Nurses and working Nurses on to active duty during a time when the Nation is experiencing a critical Nursing shortage.

I would also like to thank our great Nursing Research community for the wonderful job they have done at focusing research in those areas that will directly support our ANC; in the clinical, administrative or educational environments. A very special thanks to both **COL Laura Brosch** and **LTC(P) Pat Patrician** for their lead in moving this agenda forward.

A very special thanks to both **COL(R) Clara Huff** and **COL Barb Bruno** for their outstanding professional input as our ANC representatives in the AMEDD Personnel Proponency Directorate. Their guidance on promotion rates, year group evaluation, budgeted end strength, Command Grade Allocations and Objective Force Modeling have been invaluable regarding the future stability of our Corps. They are truly the "unsung" heroes of our Corps regarding our total force structure and future opportunities for promotions.

A very special thank you to our senior OTSG nurse staff officers, **COL Iris West, COL Kathy Simpson**, and **COL Maryann Steinmetz**, for their superb guidance as the AMEDD navigated through many issues so critical to our soldiers and their families.

Their contributions on such programs as the Army Wellness initiative and our health care readiness tracking systems, now available through Army Knowledge Online, will have lasting positive impact on the AMEDD and the Army.

In addition, I would like to thank **COL(R) Sandy Brunken** and **COL Bobby Scherb** for their leadership, vision and professional engagement regarding TO&E issues at FORSCOM. As we all know, we have many great ANC Nurses who are currently assigned and serving in TO&E units worldwide, and we are lucky to have the leadership that is able to focus on the critical is sues facing our officers serving in these very challenging environments.

I would also like to thank the ANC Fellows who have supported our office during our tenure – **MAJ Joe Paulino**, **MAJ Pat Ahearne**, **MAJ Laura Feider** and now **MAJ Jeanne Larson**. We appreciate the outstanding support you provided to us and, at the same time, we hope that you were able to better understand the decision and policy-making process at the senior levels of the AMEDD.

A critical piece of ensuring that the many actions, activities and accomplishments of the Army Nurse Corps are properly documented and archived rests with our Army Nurse Corps Historian and we have been very fortunate to have had two great historians assigned during our tenure, **MAJ** (now LTC) **Debbie Cox** and **MAJ Jennifer Petersen**. Due to their great efforts, we have carried on the century-long tradition of ensuring that what we do today is captured so that those tomorrow can learn from it and appreciate the great history that our Corps has.

A very large word of thanks goes out to our senior staff officers who have been responsible for ensuring the daily requirements, actions, suspenses and correspondence in the Corps Chief's office is effectively and efficiently managed. During the past four years, COL Margaret Bates, LTC Ellen Forster, LTC Kelly Wolgast and LTC Yolie Ruiz-Isales have been nothing short of superb in meeting the multitude of requirements placed on the ANC Corps Chief's office.

I would also like to thank the many leaders who have served as Chief Nurses during the past four years. Our Chief Nurse/DCN positions, in my view, are the most critical senior leader positions we have. They directly impact on recruitment, retention, patient safety, quality of care, mentoring, teaching and on the relationships we have and continue to develop with all members of the healthcare team. Our senior leaders who accept the demanding requirements of these Chief Nurse positions are key to our success as a Corps and I thank each of you very much for your leadership and your devotion to ensuring the very finest of nursing care is being provided to our soldiers, their families and our great retirees.

Additionally, I would like to thank the many members of our retired ANC community who continue to support us in a multitude of ways. Your time and your continued devotion to our success are very much appreciated.

Thanks also to our great NCO leadership team. As we know, the NCO's are the backbone of our military healthcare system and we have been very blessed with outstanding leadership in all of our MOS's and in both our TDA and TO&E environment. We are extremely fortunate to have the quality of NCO leadership that we have, and we have greatly prospered from their many professional contributions. In today's environment of the Global War on Terrorism, we have never had to rely more on our great Reserve Nurses and NCO's. Our Reservists are in the Theater of Operations, backfilling facilities in Europe and assisting us in meeting our peacetime requirements back here in CONUS. There is no way that we could meet the requirements of today's operations without our Reserve counterparts. I thank each of you Reservists for the great contributions you are providing to our AMEDD, both here in CONUS and OCONUS.

Finally, let me thank the person who has supported me more than anyone during my tenure as Corps Chief, and that is **COL Debbie Gustke**. COL Gustke has been a confidant, a friend, a sounding board, a consultant, a mentor and a truly outstanding advisor each and every day to me over these past four years. She has always provided me with the objective, unemotional input that I needed and always remained focused on what was best for the Corps and for the great officers and NCO's that comprise the Corps. I can't begin to imagine what the last four years would have been like without COL Gustke, but I can tell you that the Army Nurse Corps has greatly benefited from her outstanding leadership and will continue to do so for many years to come. I consider myself extremely fortunate to not only have gotten to know COL Gustke, but to have had her riding in my "right seat" during my entire time as Corps Chief. She is truly one of a kind and we have been very fortunate to have her as Assistant Corps Chief.

In conclusion, I want to once again thank each of you for all the great support you have provided to me these past four years. I will leave the Army Nurse Corps with many wonderful memories and with the knowledge that the next generation of leadership will take this great Corps of ours to even greater heights. God bless each and every one of you and may the future bring you much happiness and success.

Army Nurses are Ready, Caring, and Proud!

Bill Bester BG, AN 21st Chief, Army Nurse Corps

Nurses in the News

Army Nurse Corps Officers are featured in the articles found at the Internet links below:

An article in "Washington Afro American" highlights the achievements of a number of African-American female colonels in the Washington, DC metro area. The three Army Nurses who were interviewed are **COL Leana Fox-Johnson, COL Princess Facen and COL Carol Jones**. Click on the following link to review the entire article: http://www.afro.com/content/anmyiewer.asp?a=1460&z=1

COL Carol Jones is featured in a New York Nurses Association Report article titled "Two Distinguished Nursing Schools." This link will take you to the article: http://www.nysna.com/departments/communications/publications/report/2004/feb/schools.htm

Three Army nurses in the Officer Basic Course were chosen by the AMEDD Center and School to discuss their Army experiences and their future plans with *NURSEWEEK*. These interviews will continue periodically and feature **2LTs Franchesca Desriviere** (WRAMC), **Rahul Lall** (DDEAMC) and **Jeanie Rhodes** (WRAMC). You can access the first article at: http://www.nurseweek.com/news/features/03-10/armyRN print.html under "All They Can Be: Military RNs serve their country while practicing and developing their nursing skills," by Phil McPeck, 13 October 2003.



Congratulations to the 106 Army Nurse Corps Captains on the FY 04 Major's list! For a complete listing click on the following link: https://www.perscomonline.army.mil/select/Maj Amed04.htm

LTC Kim Smith was awarded the 2004 Army Nurse Corps Association's Advanced Military Nursing Practice Award at the Army Nurse Corps 103rd Anniversary luncheon at Fort Sam Houston in February. See complete article and photo on page 6.



COL Elizabeth Mittelstaedt and **CPT Sharon Simon** from Madigan Army Medical Center were published in Military Medicine. They wrote: "Developing a Child Safety Seat Program" for VOL 169, 1:30 Jan 2004 edition, pp 30-33.

MAJ Roland Cabiad contributed to the Case Report section of the 13 Feb 2004 edition of Morbidity and Mortality Weekly Report, VOL 53/No. 5. The case study was included under the topic "Secondary and Tertiary Transfer of Vaccinia Virus Among U.S. Military Personnel — United States and Worldwide, 2002–2004 and can be found on page 104.

From the desk of the Army Nurse Corps Fellow By MAJ Jeanne Larson

Did you know that we currently have two Army Nurse Corps officers in fellowships with the Joint Commission for the Accreditation of Health Care Organizations (JCAHO)? **LTCs Karen Grace** and **Ritza Reese** are participating in this distinguished program and they plan to provide a quarterly update on JCAHO information to the newsletter. Additionally, they are great sources of information regarding upcoming surveys in your facility. I recently had the opportunity to interview these fine officers about their fellowships:

What were your first thoughts when you found out about your current position?

LTC Reese: When I first discovered I was selected for the JCAHO Fellowship, I was overcome with mixed emotions. A part of me was truly excited for the opportunity, however another part of me felt a tremendous obligation to support my fellow soldiers during the war efforts. My selection came at the height of the war on terror. After serving almost three years as the JCAHO staff officer at Landstuhl I was placed back in the clinical area to care for our heroes returning from Iraq. There was so much uncertainty with stop movement and stop loss that the fellowship didn't seem like a "real assignment" until a month before my departure. It was at that point

that I felt great in that I was afforded the opportunity to help the wounded soldiers for a couple of months and I was now ready to experience the business aspect of corporate America.

What was the process in getting selected for this position?

LTC Grace: The Training with Industry (TWI) Fellowship with the Joint Commission is a board-selected position. An interested officer should meet the following eligibility requirements: masters degree, CGSC completion, at least eight years but not more than 17 years of active federal service, meet the Army's height/weight/PT standards, be PCS vulnerable, no adverse actions pending; not competing for any other Army scholarships or fellowships, and in the rank of MAJ or LTC. Next, the officer must request permission to apply from their Chief Nurse and Personnel Management Officer (PMO) at ANC Branch and complete an application packet. The packet includes a variety of forms, to include the officer's Curriculum Vitae, a statement of professional goals, and a letter of recommendation from the Chief Nurse. A completed packet is sent to ANC Branch and reviewed by a board that then selects a candidate. The specific contents of the application are located on the branch website.

What has been the most challenging aspect of your job so far?

LTC Grace: The most challenging aspect of this fellowship is adapting to the meticulous nature of the job. In my former assignments, the jobs were fast paced and hectic and I was expected to learn through experience. At JCAHO, the emphasis was on learning about the organization and its processes before beginning to work on projects or committees. I appreciated this opportunity to slow down and learn about the organization and the new survey process. Because of this emphasis, I was able to contribute significantly from the first day I began working.

Of the skills that you have developed in your career so far, which ones do you rely on the most in your current position?

LTC Reese: Without a doubt, the skills that have been most useful in this fellowship are the skills acquired during my past position as the JCAHO Staff officer at Landstuhl Germany. The knowledge obtained in that role related to the JCAHO survey process and standard interpretation coupled with my leadership experience working on several teams such at patient safety, nursing executive, performance improvement council, etc, has enabled me to transition into a viable member of several working teams at this organization. My involvement with several past military working groups also allowed me to gain insight into planning and to simultaneously manage a number of varied and changing project priorities.

Has your perspective toward your career in the Army Nurse Corps changed based on holding this position?

LTC Reese: This fellowship has provided me with extensive knowledge and experience on the JCAHO survey process and the value of regulatory and licensing agencies. I feel strongly that I must be diligent to ensure upon return to the AMEDD that I share my newly acquired knowledge and experience at a higher or corporate level, thus being able to better serve the ANC and enhance the delivery and quality of patient care throughout the region.

What career advice do you have for someone interested in getting assigned to a position like yours?

LTC Grace: Officers interested in the JCAHO TWI fellowship should seek out opportunities to participate in the survey process in their current assignment. Preparing for a JCAHO survey is a joint effort and requires all of the staff to work towards the goal of accreditation. In a medical center, you may volunteer to work on a unit specific team responsible for JCAHO preparation. In smaller facilities, a staff nurse may participate on an organizational team that focuses on a specific set of JCAHO standards. Prospective applicants should also seek out educational opportunities. The JCAHO website is full of information about the survey process, field review of new standards, and their involvement in public policy. This position is an excellent opportunity to meet the challenge of providing safe, quality patient care.

LTC Reese: The best advice I can offer potential candidates interested in the JCAHO fellowship is to be active in a variety of positions and committees in addition to your clinical obligations. Volunteer to serve as either a team member or a team leader for a JCAHO team within your organization, participate on performance improvement activities, understand team dynamics and the importance of collaboration. Volunteer to assist the education department with teaching. In this fellowship, valuable skills include excellent interpersonal skills, time management, effective communications, research, teaching and good speaking skills.

Editor's note: Please feel free to contact LTC Grace at kgrace@jcaho.org (Comm: 630.792.5711) and LTC Reese at rreese@jcaho.org (Comm: 630.792.5784) if you have any questions about JCAHO and the survey process.

4th Quarter CY 2003 JCAHO Military Fellow Report by LTC Karen Grace and LTC Ritza Reese

- 1. <u>Shared Visions New Pathways Video Series</u> JCAHO has introduced a <u>Shared Visions New Pathways video series</u> which can be accessed via the JCAHO web [http://www.jcaho.org/index.htm] site. The video series provides overviews of the new survey process; the standards review project, and the new accreditation decision process.
- 2. <u>Priority Focus Process</u> The Priority Focus Process (PFP) converts pre-survey data (ORYX, previous survey information, sentinel event data and the application for survey) into information that focuses survey activities, increases consistency in the accreditation process, and customizes the accreditation process to make it specific to your organization. From these sources, the PFP identifies the Priority Focus Areas (PFA) for each organization on which surveyors initially will focus during the initial part of the on-site survey. Priority Focus Areas are processes, systems, and structures in a health care organization that significantly impact safety and/or quality of care, treatment, and services. Please refer to the website for further information: <u>Priority Focus Process</u>
 [http://www.jcaho.org/accredited+organizations/svnp/svnp+qa_priority+focus+process.htm]
- 3. Periodic Performance Review (PPR) The Periodic Performance Review (PPR) a new accreditation requirement for 2004 whereby an organization reviews its compliance with all applicable Joint Commission standards. Each organization will complete and submit to the Joint Commission a plan of action for any standard not in full compliance, including the measure of success (MOS) and engages in a telephone conference with a member of the Standards Interpretation Group staff to determine the acceptability of the plan of action. The PPR will encourage organizations to be in continuous compliance with Joint Commission standards. While JCAHO recommends the full PPR as the preferred choice for accredited organizations, two additional options are available for those organizations with concerns of confidentiality. For additional information please refer to Periodic Performance Review [http://www.jcaho.org/accredited+organizations/svnp/qa_ppr.htm]. The Periodic Performance Review (PPR) was launched in October and notification sent to DoD Medical Treatment Facilities who were last surveyed in July 2002. The PPR is available on the organization's JCAHO Ext ranet web site.

4. JCAHO Standard Updates

a. New JCAHO "Do Not Use" Abbreviations:

The Joint Commission recently published a "Minimum List" of dangerous abbreviations, acronyms and symbols. **Beginning January 1, 2004,** each MTF must have the "MinimumList" incorporated into their DO NOT USE ABBREVIATIONS list. **In addition, by April 1, 2004** each MTF must identify and apply at least another three "Do Not Use" abbreviations, acronyms or symbols of its own choosing. Refer to "Do Not Use" Abbreviations

[http://www.jcaho.org/accredited+organizations/patient+safety/04+npsg/04 faqs.htm]

b. New Infection Control Standards for 2005

The Joint Commission board of directors recently approved new Infection Control Standards effective January 1, 2005. Additional information can be found at 2005 Infection Control Standards

[http://www.jcaho.org/accredited+organizations/accredited+organizations+.htm]

c. Universal Protocol to Prevent Wrong Site Surgery

The nation's medical, nursing, and health care leadership associations and organizations have joined the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) in a new nationwide effort to eliminate wrong site, wrong procedure, and wrong patient surgeries. More than 40 organizations have now endorsed a new Universal ProtocolTM to standardize pre-surgery procedures for verifying the correct patient, the correct procedure, and the correct surgical site. The Universal Protocol will become effective July 1, 2004 for all Joint Commission-accredited hospitals, ambulatory care surgery centers, and office-based surgery sites Additional information can be found at: Universal Protocol News Release

5. **DoD Account Representative**

The DoD account representative is Lisa Stahly who can be reached at 630-792-5746 or email at lstahly@jcaho.org

6. 2003 Perspectives Articles of interest 4th Quarter CY03

- a. Shared Visions-New Pathways Terms Defined (December 2003 edition)
- b. Universal Protocol Approved Preventing Wrong-Site Surgery (October 2003 edition)
- c. ORYX Requirements Increased for Hospitals (September 2003 edition)

Spouses, Family Eligible for Nursing Scholarships

Army spouses and family members who want to be nurses can apply for a Health and Human Services-sponsored and managed scholarship that pays tuition and other costs. The scholarship carries a required service obligation, which may be comp leted in a military treatment facility. Information about the scholarship program is available online at http://bhpr.hrsa.gov/nursing/scholarship/. Applications for this year's scholarship money are projected to be available by April 2004, the website will have the contact information for requesting an application and additional information on application deadlines.

HHS's Nursing Scholarship Program offers nursing scholarships in exchange for at least two years service at a healthcare facility with a critical shortage of nurses. If awarded a scholarship through the program, recipients may repay the service obligation at an Army medical treatment facility. With direct-hire authority for civilian hiring in place, recipients will be able to apply for hire after they complete their education and become licensed and registered as professional nurses. The program pays tuition, required fees, other reasonable costs (including required books, clinical supplies, laboratory expenses, etc.) and a monthly stipend (\$1,098 for the 2003-2004 academic year). Scholarship applicants must be U.S. citizens or U.S. nationals. They must be enrolled or accepted for enrollment as a full- or part-time student in an accredited school of nursing in a professional program (baccalaureate, graduate, associate degree or diploma). Qualified applicants who have the greatest financial need receive funding preference.

Soldier's Creed

I am an American Soldier.

I am a Warrior and a member of a team. I serve the people of the United States and live the Army Values.

I will always place the mission first.
I will never accept defeat.
I will never quit.
I will never leave a fallen comrade.

I am disciplined, physically and mentally tough, trained and proficient in my warrior tasks and drills. I always maintain my arms, my equipment and myself.

I am an expert and I am a professional.

I stand ready to deploy, engage, and destroy the enemies of the United States of America in close combat.

I am a guardian of freedom and the American way of life.

I am an American Soldier.

Army Nurse Corps Association Advanced Military Nursing Practice Award Winner

Each year the Army Nurse Corps Association (A.N.C.A.) awards the Advanced Military Nursing Practice Award to a field grade officer, below the rank of Colonel or Lieutenant Colonel (P), who has made a significant contribution to the practice of nursing during the previous two years. This annual award is separate and distinct from any other that may be given for particularly outstanding duty performance. The award is intended to honor a middle-range ANC officer who has contributed significantly to the practice of nursing, and to enhance the image of the Army Nurse Corps, active and retired, within the profession of nursing. Ten excellent candidates were nominated for this prestigious award, all of whom were very deserving. This year's Advanced Practice Military Nursing Award goes to LTC Kimberly Smith, Chief Nurse, Army Trauma Training Center (ATTC), Miami, FL.

As the Chief Nurse, ATTC, LTC Smith is responsible for the education and training of both active and reserve forward surgical teams (FSTs) within a 1700 bed civilian trauma center. She was instrumental in the development of the ATTCcurriculum and ensured the training meets national nursing standards. In her previous



LTC Smith (center) holds her award at the ceremony. COL (Ret.) Doris Cobb is on the left and COL Jan Harris is on the right.

assignment, she served as Deputy Director of the Primary Care Section at Evans Community Hospital. Additionally, LTC Smith was the chairperson of the hospital-wide multidisciplinary continuum of care committee for discharge planning. She was instrumental in the development of patient safety initiatives by writing hospital-wide restraint protocols, including training, to ensure 100% compliance of hospital staff. LTC Smith also published a JRTC Field Guide to educate PROFIS doctors and nurses.

LTC Smith is currently the Principal Investigator for a TriService Nursing Research Program (TSNRP) grant, "Evaluation of Staff's Retention of ACLS and BCLS Skills." Based on the results of this study, LTC Smith developed an innovative "first responder course" to improve the skills retention of providers. As the consummate educator, the American Association of Critical Care Nurses

selected LTC Smith as an item writer for the Critical Care Registered Nurse certification exam. In constant support of medical and nursing training, LTC Smith continues to teach ACLS, TNCC, and ABLS. Her caring and supportive leadership style is instrumental in fostering a highly productive, motivated, and unified atmosphere for future Army Nurse Corps officers. Congratulations, LTC Smith!

Nominees for this year's award were: LTC Lori Bond, LTC Joan Lancaster, LTC Patricia LeRoux, MAJ(P) Lena Gaudreau, MAJ(P) Elizabeth Vane, MAJ Mary Carson, MAJ Kathleen Herberger, MAJ Ronald Parsons (USAR) and MAJ Sara Sproat.

Critical Care Website: Coming soon!

The new **Critical Care Website** will be a one-stop shop for military critical care nurses to obtain vital information regarding patient care and professional development. This site will include important links to professional organizations and will contain research-based SOPs for peers to review and modify for their own facility. We are currently in the development phase and welcome all input regarding the content that should be included. Please send any specific information that can be included in the topics such as SOPs, clinical research, clinical practice techniques, and "war" stories—either literally from the war or day-to-day nursing. For example, critical care issues such as JCAHO requirements, SOPs, patient scenarios, research/evidence-based practice, mentorship and ANC-specific stories.

MAJ Lisa Snyder is working in conjunction with COL Juanita Winfree, the Critical Care Consultant, on this project. You may contact MAJ Snyder at lisa.snyder@us.army.mil.

Women's History Month "Women Inspiring Hope and Possibility" By MAJ Jennifer Petersen, AN Historian



The 2004 theme, "Women Inspiring Hope and Possibility" celebrates the hope and sense of possibility that comes to our lives through the inspirational work of women. Hope comes in many forms from laws challenged and changed, new medical research, to stories of compassion and courage, and watching women stand tall against great odds. Many women who have served as members of the Army Nurse Corps represent this vision of hope in a myriad of ways.

One example is WWII Army Nurse Corps officer First Lieutenant Aleda Esther Lutz. Lutz, daughter of George F. and Marguretta Lutz, of Freeland, Michigan, was born at Tittabawassee, Michigan on 9 November 1916. She earned her nursing degree at Saginaw General Hospital, Saginaw, Michigan in 1937. After a period of private duty nursing, Lutz volunteered her services to the Army Nurse Corps in 1942. She was commissioned a 2nd Lieutenant on 10 February 1942 and reported for active duty at the Station Hospital, Selfridge Field, Michigan. In December 1942, Lutz transferred to Morrison Field, Florida and completed flight nurse training. After completion of this training, she joined the 802nd Medical Air Evacuation Transportation Squadron (MAETS) with duty in North Africa.

A devoted nurse who served her wounded patients with professional skill and courage, Lieutenant Lutz distinguished herself as a flight nurse. As a flight nurse, she flew 196 missions with over 814 hours of flying time. Acting as a true pioneer for air evacuation, Lutz assisted in the evacuation of over 3,500 wounded servicemen via "flying ambulances" which was a new means of providing care to the wounded. Lutz gave aid and comfort to wounded troops that were being evacuated from the battlefront. Active in the European, African and Italian battlefields, she helped to evacuate wounded troops while under enemy fire.

On November 1, 1944, during her 196th mission, in an evacuation effort from Luxeuil, France to Istres, France, Lutz's C-47 plane carrying the crew and 15 wounded servicemen went down in a raging storm. The plane crashed into the side of a mountain and burned in the vicinity of St. Chamond, France. There were no survivors. Lutz was 29 years old. More than 400 military women died during World War II, Lutz was one of the first to die in a combat zone. A member of her unit stated, "When the weather was fit for fishes, not birds, and when the overcast was so heavy even a homing pigeon couldn't navigate, Lieutenant Lutz would fly."

Lieutenant Lutz is recognized as one of the first women to receive the Distinguished Flying Cross, our nation's second highest military honor. Other awards presented to her include the Air Medal with four Oak-leaf Clusters, the European-African theater ribbon with five stars for service in the Tunisian, Sicilian, Southern Italian, Central Italian and Southern France campaigns. Posthumous tributes include the naming of a 16,000-ton Army Hospital Ship, the Aleda E. Lutz and the dedication of the Michigan Veterans Affairs Medical Center in Saginaw, Michigan, the Aleda E. Lutz VA Medical Center. It is the only VA Medical Center named for a female veteran.

Rated as a superior nurse by her supervisors and peers, Aleda E. Lutz represents the Army Nurse Corps and all women with honor. Her courage, devotion to duty, professionalism and skill exemplify the traits of Army nurses today and yesterday. In recognition of the celebration of Women's History Month, the Army Nurse Corps salutes this servicewoman and all women who dare to stand against the odds to make a difference.

Historical Data located at the Army Nurse Corps Collection, United States Army, Office of Medical History, Office of The Surgeon General, Falls Church, VA March 2004.

ARMY One Source

Real help. Anytime. Anywhere.

Army One Source - a Soldier and family resource program to help you run your life a little smoother.

In recognition of the sacrifices each Soldier and family are making as part of the Global War on Terrorism, the Army has implemented a new program of services and counseling support called Army One Source – a pre-paid Soldier (Reserve, National Guard and Active Duty) and family resource program to help make your life a little easier. Army One Source is fast, private and easy to use. It's at no cost to you. And best of all, it's there for you any time of the day or night, wherever you are.

The program offers private counseling support for all Soldiers or families. Services include individual, marital, and family counseling. Counseling occurs off post, after hours, through a civilian provider in your community. Records remain private and chain of command is not notified unless there are issues of abuse or dangerousness. All Guard, Reserve, and Active Soldiers and family members are eligible regardless of active duty status. Counseling may be directly accessed through the Army One Source number, 1-800-464-8107.

Army One Source will also provide information, advice and support on a wide range of everyday issues including:

- Parenting and child care
- Education
- Older adults
- Midlife and retirement
- Relocation
- Financial and Legal
- Deployment and Return
- Everyday issues
- International
- Work
- Managing people
- Emotional well-being
- Grief and loss
- Addiction and recovery

Keep reading to see how Army One Source has made a difference in the lives of some Soldiers and their families who have used its service:

Reconnecting with Family

When a soldier returns from deployment, the initial exuberance may give way to some difficulties in reconnecting with family members who remained behind. A call to Army One Source can arrange a referral to a private counselor in the community. All National Guard, Army Reserve and Active Duty soldiers and family members residing in CONUS are eligible.

Choosing a Summer Camp

"I don't really know where to start," the single father said when he called Army One Source. "I have custody of my two children this summer. I've been browsing through Army One Source Online and I read the articles on planning summer activities. I even found some specific camps that sound interesting in your Camp Locator, but I have questions and I'd like to know more about some activities in my area."

To help him get the answers he needed, an Army One Source consultant asked about the children's ages, their interests and personalities, the family's budget and other relatives who lived nearby. A few days later, the consultant mailed information about local day camp programs, along with tips on what to look for when choosing an overnight camp or a day program.

Plugging a Leaky Roof

"My neighbor has been watching my house while I'm away. He just called to say there is water running down my walls after the recent storm and the roof's leaking!" a Soldier exclaimed when she called Army One Source. "What can I do? I have a meeting tomorrow and can't just cancel and come home."

The Army One Source consultant got right to work, and quickly identified several licensed, reputable roofers and contractors not far from the Soldier's home – some with after-hour emergency numbers. He even located an insured, bonded individual who could stay at her house while estimates and repairs were made.

Get in touch with Army One Source today.

From the U.S.: 800-464-8107
International: 800-464-81077 (dial all eleven digits)
International collect: 484-530-5889
Or: www.armyonesource.com

first screen will request entry of the following:

User ID: army
Password: onesource

News from the OB/GYN Consultant By LTC Ramona Fiorey

Since April 2002, MTFs have been addressing the improvement of obstetrical care as a result of the NDAA 2002 (National Defense Authorization Act) that allows beneficiaries to disenroll from TRICARE and receive their obstetrical care in the civilian sector. Health Affairs Policy 04-003 establishes the plan to improve obstetrical services in MTFs through the implementation of Family-Centered Care during the perinatal period. The policy dictates that MTFs must comply with the following specific elements.

- 1. Implement VA/DoD Clinical Practice Guidelines for Uncomplicated Pregnancy. (Detailed information is available at www.qmo.amedd.army.mil/pregnancy/uncompreg.htm).
- 2. Identify a primary obstetrical provider for each prenatal patient.
 - a. The standard is a minimum of 75% of visits occur with the same provider for prenatal, perinatal and postpartum care.
- 3. Use standardized obstetrical services/incentives that promote family participation and choice of MTFs for care.
 - a. Implement Family Centered Care
 - b. Individualize prenatal/childbirth education to include classes, pamphlets, videos, and websites based on needs of the patient/family.
 - c. Provide opportunities for development of individualized birth plans that reflect patient-family preferences.
 - d. Provide comprehensive personalized pain management.
 - e. Offer next follow-up appointment prior to patient departing the MTF.
 - f. Well-baby follow-up scheduled prior to hospital discharge.
 - g. Provide medically necessary second trimester ultrasounds.
 - h. Provide lactation support 24/7.
 - i. Complete admission/discharge paperwork at bedside.
 - j. Improve parking for obstetric patients.
 - k. Increase the number of private labor/delivery and postpartum rooms.
- 4. Report quality/satisfaction measures to leadership (OTSG).
- 5. Establish and support family advisory groups at MTFs to promote effective partnerships between families and providers. (Memorandum from Assistant Secretary of Defense to Assist Secretary of the Army dated 22 Jan 2004. Anyone who wants a copy, please send me an email.)

The OB Challenge VTCs continue to be held about every month or two to discuss the issues noted above. Senior level leadership for Maternal Child Health Nursing in MTFs should make every effort to attend these VTCs. Dr. Peter Nielsen, the OB/GYN Medical Corps Consultant, OTSG, chairs these meetings. They provide MTF staffs caring for obstetric patients an opportunity to hear first hand information regarding obstetric issues and what other facilities are doing to promote obstetric care.

The following are topics that were discussed at the Feb 23 VTC. While some are not necessarily directly related to nursing, nurses should be aware of all the issues for obstetric care in Army MTFs and be able to provide input as OB care in Army MTFs continues to evolve.

The Navy has contracted with a civilian agency that is well versed in the Family Centered Philosophy of care and is offering
one-day training programs at several locations across the US. Attendees from DeWitt ACH at Ft. Belvoir highly
recommended attendance at this course for all levels of obstetric providers from senior leadership to point-of-care providers.
POC for the Navy sponsored seminars is CDR Gina Savini at <u>Gsavini@US.MED.NAVY.MIL</u>. It is likely that additional
AMEDD sponsored seminars will be planned for personnel from Army MTFs as well.

- 2. One of the biggest challenges with implementing family centered obstetric care has been provider continuity during the antepartum period. There is not a standardized definition of what comprises 75% provider continuity and this data has been collected by the "stubby pencil" method at MTFs. Recommendations were made to better define continuity of care, implement an automated mechanism for data collection and to address whether patients are satisfied with their level of continuity as a better measurement of success.
- 3. A DoD Maternal-Fetal Medicine network is being created to address specific high-risk obstetric issues, particularly standardization of second trimester ultrasounds and use of fetal fibronectin for predicting preterm delivery. Funding for utilization of the fetal fibronectin technology as a standard in DoD facilities requires a protocol for use and determination of cost effectiveness before it can be implemented. This technology could potentially reduce the number of transfers of patients diagnosed with preterm contractions from smaller facilities to hospitals with a higher level of care.

The next VTC will be on 26 April, 1400 EST/0900 PST. All facilities where OB care is given have capability to receive the VTC.

Perinatal nurses are always looking for resources that may be helpful to our patients and their families, particularly for areas for which we often don't have comprehensive resources available. Here's a number you may want to post in your patient care areas - Army OneSource, 888-267-8126. This is a free hotline available 24/7 to all soldiers/families that addresses nearly any issue and will provide counseling or make arrangements for up to 8 individual sessions with a local qualified counselor. Pamphlet advertising Army OneSource are available at every installation Army Community Service Center.

I am still working on a MEDCOM OB admission assessment. My suspense to have a draft document for consideration at the MEDCOM Documentation committee meeting is 25 March. I have sent examples of three assessment forms to a number of OB unit managers for comment. If you have not received an opportunity to give input, please email me (Ramona.fiorey@nw.amedd.army .mil).

Office of the Chief, Army Nurse Corps			
Fort Sam Houston Office	Washington, DC Office		
COL Deborah Gustke	LTC Kelly Wolgast		
LTC Yolanda Ruiz-Isales	Headquarters, DA		
MAJ Jeanne Larson	Office of the Surgeon General		
AMEDD Center and School	6011 5th Street, Suite #1		
ATTN: MCCS-CN, Room 275	Fort Belvoir, VA 22060-5596		
2250 Stanley Road	703.806.3027		
Fort Sam Houston, TX 78234	DSN 656		
210.221.6221/6659	Fax: 703.806.3999		
DSN 471	kelly.wolgast@belvoir.army.mil		
Fax: 210.221.8360			
yolanda.ruiz-isales@amedd.army.mil	AN Website:		
	http://armynursecorps.amedd.army.mil/		
jeanne.larson@amedd.army.mil	AN Branch PERSCOM:		
	www.perscomonline.army.mil/ophsdan/default.htm		

The 110th Annual Meeting of the Association of Military Surgeons of the United States (AMSUS) will be held in Denver, CO from 14-19 November 2004. The following information details this year's AMSUS Awards Program:

AMSUS 2004 ANNUAL AWARDS PROGRAM

The Association of Military Surgeons of the United States (AMSUS) acknowledges the abilities of many outstanding Federal healthcare individuals each year through the Awards Program.

The Awards are presented at the Association's Annual Meeting during the Annual Dinner. Each recipient is presented his or her award personally by the Executive Director and the Surgeon General or Chief Medical Director of his or her service. Photographs of the award recipients are printed in the meeting program.

Nineteen of the awards are competitive awards. Members are encouraged to nominate individuals for these awards. Only through input from the members can the awards program be considered a success. (We also accept nominations from non-members.) AMSUS Awards Committee members, comprised of representatives of the Federal health agencies, select the competitive award winners.

Three of the awards are essay awards. Without research and other studies, the healthcare field would become stagnant. AMSUS takes great pleasure in acknowledging those individuals who have made efforts in these areas, realizing the enormous amount of time and work necessary to complete any one project. The impact of these projects on the healthcare field is enormous. It takes a special individual to take that vital step toward continued learning.

AMSUS has six awards for which nominations are not taken. Four of these awards are lecture awards. The recipients of these awards are individuals in different fields of study who have made contributions to their fields in the past and who can make additional contributions to military healthcare by presenting a lecture at the AMSUS Annual Meeting relating to the theme for that meeting, for the benefit of the AMSUS member. The other two awards that are non-competitive are The Founder's Medal and the Joel T. Boone Award. These two award recipients are chosen by the Association for service, over an extended period of time, to AMSUS.

NOMINATION SUBMISSION

As a member, you are in the unique position to nominate a deserving individual for an AMSUS competitive award. So many individuals do outstanding work in their fields, yet are never recognized publicly for that work. This is your opportunity to see that recognition is given. If you know of someone who should receive recognition, and whose work qualifies them for one or more of the AMSUS awards, please take a little time to let us know.

The deadline for nominations and essay submissions is 30 June. Nominations and essay submissions must be postmarked with a United States Postal Service postmark by 30 June to be considered for that year's awards program. Nominations hand delivered by 30 June are also eligible. (Nominations received that have a postmark dated after the deadline will be returned.) Be sure to include a return address. Send all nominations and essay submissions to: AMSUS Awards, 9320 Old Georgetown Road, Bethesda, Maryland 20814.

Remember that the individuals on the awards committee probably do not know anything about the person being nominated. The only way they can make a decision is by reading the material you send. The required information to include when nominating an individual:

- 1. A cover letter explaining why you feel that individual deserves the award.
- **2.** A curriculum vitae for the individual nominated.
- 3. A listing of the individual's publications, awards, honors, and other professional accomplishments
- **4.** A short, one-line citation suitable for use on a plaque or scroll.

Any supporting letters from other individuals must be included with the nomination package.

<u>Send one original and six copies of the entire nomination Package</u>. We must have the full name and address of the individual being nominated, as well as the name and address of the individual sending the nomination. NOTE: Absolutely *no submissions* will be accepted over the facsimile machine.

For the essay awards, each submission is sent directly by the author. The essay awards are not nomination awards. Submissions for the essay awards are not processed for publication in *Military Medicine*. A separate submission to the journal is required for consideration. Individuals chosen to receive awards will be notified by mid-August.

NURSING AWARDS

CLINICAL NURSING EXCELLENCE AWARD

Established in 1989 to recognize and honor accomplishments and work performance in clinical nursing, resulting in contributions of an outstanding and sustained nature by a nurse, who has had substantial impact on the mission of a Federal Health Agency.

Qualifications: Any professional nurse whose current duty assignment is in clinical practice in the Federal Nursing Services is eligible to compete for this award. No person shall be eligible for a second award. All nominees must be AMSUS members or eligible for membership. A plaque and a monetary award are presented. This award is sponsored by Johnson and Johnson Healthcare Systems.

The recipient should be one who:

- 1. Evidences resourcefulness and dedication in helping to accomplish the mission of the Federal Health Agency;
- 2. Demonstrates professional and technical skills and competence raising the quality of nursing;
- 3. Shows evidence of exceptional ability to apply nursing standards of practice;
- 4. Remains involved in continuing education as a participant, organizer, or sponsor;
- 5. Is of such excellence as to merit AMSUS recognition.

Recent Clinical Nursing Excellence Award recipients:

1999 Lieutenant Colonel Elizabeth A. Mittelstaedt,	AN,	USA
----------------------------------------------------	-----	-----

2000 Marilyn Lynn, M.S.N., VA

2001 Colonel Linda H. Yoder, AN

2002 Lieutenant Colonel John S. Murray, USAF, NC

2003 Lieutenant Commander Mark Martineau, USPHS

FEDERAL NURSING SERVICES AWARD

An essay award. The Federal Nursing Services Award is presented to a professional nurse from the Federal Nursing Services who has submitted an essay on the results of a study or a scholarly paper that would have an impact on nursing.

Subject material may pertain to:

- A report of a collaborative study;
- Testing models;
- Changing or improvements of nursing standards:
- Implementation and evaluation of quality assurance programs;
- Replicating studies;
- Client and staff education and/or evaluation of continuing education.

The essay must be an original work, have not been published previously, and not be in the process **of** being considered for publication elsewhere. If it is a research study, the work must have been undertaken within the past five (5) years.

All nominees must be AMSUS members or eligible for membership. A plaque and monetary award will be presented.

The original manuscript and ten (10) copies are requested for review. The deadline for submission of the essay is 30 June.

Recent Federal Nursing Service Award Recipients:

1999 Colonel Christine A. Wynd, AN, USAR

2000 Colonel Marilyn A. Ray, USAFR, NC, Ret.

2001 Not Given

2002 Colonel Margaret Chamberlain Wilmoth, AN, USAR

2003 Captain Felecia Rivers, AN, USA

ENLISTED AWARD

LEWIS L. SEAMAN ENLISTED AWARD FOR OUTSTANDING OPERATIONAL SUPPORT

This award is made possible through funds first provided to the Association in **1900** by the late Major Lewis Livingston Seaman, a Surgeon of the First US. Volunteers, Spanish American War. After many years of not being awarded, the Lewis L. Seaman Enlisted Award for Outstanding Operational Support was established in **1998** to recognize an enlisted medical healthcare professional who has made a significant impact in the areas of patient care, clinical support or healthcare management, and to his or her service's medical mission.

The award is to be presented to an Active Duty, Reserve or Guard enlisted professional of the Army, Navy, Air Force, or Coast Guard holding the rank of E-5 through E-9, who has exhibited outstanding accomplishments in advancing the healthcare mission of his or her service through demonstrated sensitive and quality patient care and service, clinical support or healthcare management. All nominees must be AMSUS members or eligible for membership. A plaque and a monetary award are presented.

Criteria for the award, in addition to the required material from page 1, include statements from the nominator regarding all or most of the following:

- a. Demonstrated contributions, dedication, and resourcefulness in providing patient care, clinical support or healthcare management.
- b. Outstanding service, devotion, and/or compassion while performing his or her duties.
- c. Procedures or methods developed by the nominee which resulted in significant reduction in man hours, expenditures or materiel.
- d. Job knowledge and performance demonstrating competence, initiative, and leadership.
- e. Dedication in helping accomplish the medical mis sion.
- f. Involvement in continuing education as a participant, organizer, or sponsor.
- g. Humanitarian and community involvement.

Recent Lewis L. Seaman Enlisted Award Recipient:

1999	Staff Sergeant	Samir I.	Shahin.	USAF

2000 Master Sergeant Scott P. Graham, USAF

2001 Chief Petty Officer Joseph Carr, USN

2002 Master Sergeant David M. Dombrowski, USA

2003 Master Sergeant Daren Robinson, USAF

AMSUS 2004

The Federal Nursing Section Poster Session is sponsored by the Federal Nursing Service Chiefs and is dedicated to sharing professional nursing knowledge and improving the delivery of health care services. Registered nurses in the federal services and the American Red Cross are invited to submit a poster abstract for the Federal Nursing Section Poster Session to be held during the 110th Annual Meeting of the Association of Military Surgeons of the United States (AMSUS) in Denver, Colorado 14-19 November. The poster session will be held Monday evening, 15 November 2004.

L NURSING SECTION POSTER SES **Call for Posters**

"AMSUS: Supporting Our Nation at War"

ABSTRACT SUBMISSION DEADLINE

July 2004

Below are some examples of topics that relate to the theme of the 2004 conference.

Educational Technology Joint Medical Training **Innovative Clinical Practice Issues** Joint Operational Exercises Clinical Pathways Joint Service Initiatives Multidisciplinary Approach to Care

Health Promotion Initiatives Deployment Issues Put Prevention into Practice Medical Preparedness Leadership Patient Evacuation

Field Nursing Mobilization Nursing Management of CBRNE (Chemical, Biological, Radiation, Nuclear and High Explosives)

Requirements

- *This program differs from the Karen Rieder Nursing Research Poster Session. Research is not required.
- * The principal poster presenter must be a registered nurse in the federal service or the American Red Cross.
- * Posters must fit on an easel approximately four feet by 6 feet. Easel will have firm backing.
- * Abstracts must be limited to two typed (12 font) pages. Abstracts longer than two pages will not be considered.
- * Abstracts must include names, addresses, phone numbers, and e-mail addresses of all authors.
- * Submit an original abstract in hard copy (NOT FAXED) or as an e-mail attachment in MS Word.
- * Abstracts (hard copy or e-mail) must be received by 2 July 2004.
- * Abstracts must address the following:
 - Aims/objectives of the poster
 - Findings and/or implications for nursing

Selection of Abstracts for Presentation

- * Abstracts will be reviewed and selected by Federal Nursing Section representatives from each service.
- * The selection committee will consider diversity of topics and exhibition space in making selections.
- * Unless otherwise specified, the principal presenter on the abstract will be expected to present at the session.
- *Please submit an original abstract in hard copy or as e-mail attachment in MS Word to:

COL Maryann T. Steinmetz

Office of the Surgeon General, Health Policy & Services

5109 Leesburg Pike, Skyline 6, Suite 684

Falls Church, VA 22042-4258

mailto:Maryann.steinmetz@otsg.amedd.army.mil

*Notification of acceptance and further instructions will be sent no later than 30 July 2004. **IF SELECTED, PRESENTERS MUST MAKE THEIR OWN FUNDING ARRANGEMENTS.

14th Annual Asia Pacific Military Medicine Conference

Co-Hosted by U.S. Army Pacific and the Australian Defence Force

The theme of the conference is

PROFESSIONAL MASTERY IN MILITARY HEALTH

Brisbane, Queensland Australia Hilton Brisbane Hotel

9-14 May 2004

Abstract and poster submission deadline is 13 MARCH, 2004.

The U.S. Army, Pacific and Australian Defence Force (ADF) are sponsoring the fourteenth annual Asia-Pacific Military Medicine Conference (APMMC XIV) in Brisbane, Australia at the Hilton Brisbane, 9-14 May 2004. The theme of this conference is "Professional Mastery in Military Heath." Other topics include the military aspects of humanitarian deployments, preventive medicine, environmental medicine, infectious diseases, psychiatry, combat medicine, including medical strategies for low intensity battles, technological advances in telemedicine, and other military relevant medical topics. Over 30 foreign countries will be invited to present and exchange medical information. Interested U.S. military medical personnel (physicians, nurses, dentists, medical service corps, and veterinarians) are invited to attend. Continuing medical education and continuing nursing education units will be awarded for attendance at this conference.

We have posted APMMC XIV information / announcement / registration on the web at the following website:

http://apmmc.org

ALL REGISTRATIONS SHOULD BE MADE VIA THE WEB SITE

POC: COL Stephanie Marshall, Deputy Commander for Nursing, TAMC.

Email: stephanie.marshall@haw.tamc.amedd.army.mil or phone 808-433-5025.

Grant Camp 2004

The Resource Center of TSNRP Invites Applications

Grant Camp 2004 is a grant-writing workshop, presented in two phases, sponsored by the Resource Center of the TriService Nursing Research Program.

PHASE I 23 – 28 May 2004. Course presentations will cover Principles for Success; Fatal Flaws; Conceptual Framework; Developing Research Objectives; Research Design & Methodology; Measurement & Statistical Analysis; Timelines; Grantee Organizations; IRB Issues; Budgeting & Personnel; Packaging the Proposal; and much more. Sessions will consist of lectures, round-table discussions, and one-on-one consultations with faculty. RESEARCH PLAN required.

PHASE II 19-20 August 2004. Mock scientific review. Participants must submit a complete GRANT APPLICATION applying lessons learned in Phase I. Each participant will experience first-hand the scientific review process, serve as peer reviewer, and learn the key criteria used for scoring.

Eligibility

All Active Duty, Reserve, & National Guard Nurse Corps Officers are eligible to apply. Target audience - novice or junior investigators with limited research experience.

Requirements

- Attendance at BOTH Phase I & Phase II of Grant Camp 2004.
 Phase I will be in Bethesda, MD; Phase II is tentatively scheduled for San Diego, CA.
- Submit a written RESEARCH PLAN for Phase I and a GRANT APPLICATION for Phase II. Refer to http://usuhs.mil/tsnrp/applying/submissionguidelines.html. To navigate the website: Click on PHS 398 Forms, select Full Set of PHS 398 Forms, scroll down to Research Grants Table of Contents, and then Submit items A G under RESEARCH PLAN.

Submission Deadlines

- ❖ <u>5 April 2004.</u> Electronic copy of RESEARCH PLAN <u>and</u> application form must be received in the TSNRP office by 5:00 p.m. Eastern Time.
- ❖ 18 July 2004. Electronic copy of revised and complete GRANT APPLICATION must be received in the TSNRP office by 5:00 p.m. Eastern Time. Refer to http://usuhs.mil/tsnrp/applying/submissionguidelines.html.

Notification

19 April 2004. Notification of acceptance and further instructions will be sent to applicants via e-mail by 5:00 p.m. Eastern Time.

Disclaimer

Attendance at Grant Camp does not guarantee funding of your research proposal.

Please address questions about Grant Camp 2004 to:

Maria Burcroff

Resource Center Coordinator

TriService Nursing Research Program

mburcroff@usuhs.mil

Telephone (301) 295-7064 Fax (301) 295-7052

www.usuhs.mil/tsnrp

Human Resources Command (HRC) Update Please visit us at https://www.hrc.army.mil

<u>Army Nurse Corps Branch Web Page</u>: The direct address for our web page is: www.perscomonline.army.mil/ophsdan/default.htm. Please visit our website to learn more about the AN Branch and for matters pertaining to your military career. You will be forwarded to the HRC Website until all links are completed.

HPLRP On 12 April 2004 a board will be held for the U.S. Army Health Professions Loan Repayment Program (HPLRP). This program is available for Army Nurse Corps Officers who have at least six months and no more than 96 months of Active Federal Commissioned Service (AFCS) as an AN officer. The deadline for completed packets to reach Army Nurse Corps Branch is 5 April 2004. Please see your Chief Nurse for more information. Point of contact at AN Branch is COL Roy Harris or CPT James Simmons at DSN 221-2330 or Comm: (703) 325-2330.

Upcoming Boards

MAR 2004	LTC AMEDD
APR 2004	HPLRP
JUN 2004	SSC (SPECIAL BRANCHES)
JUL 2004	COL AMEDD
JUL 2004	CSC (SPECIAL BRANCHES)
JUL 2004	HPLRP
OCT 2004	LTHET

See HRC Online www.perscomonline.army.mil for MILPER messages and more board information.

As the Board process continues to evolve, the AN Corps must upgrade its preparation process to ensure our records are seen in the best possible light. Board members view three items; the ORB, Photo and Microfiche. These items are at your fingertips via the following links using your AKO USERID and PASSWORD:

Officer Record Brief	DA Photo (only if your photo was taken after 1 OCT	Official Military Personnel File (OPMF
https://isdrad15.hoffman.ar	02. Earlier photos will be in hard copy here at branch	previously know as your microfiche)
my.mil/SSORB/	until the board file is prepared by the DA Secretariat)	https://ompf.hoffman.army.mil/public/ne
	https://isdrad15.hoffman.army.mil/dapmis/execute/Image	<u>ws.jsp</u>
	AccentProlog	

Command and General Staff College		
Army Reserve Component:	CGSC Correspondence Course:	
Phases 1 and 3: Contact Jennifer West at 703-325-3159.	https://cgsc2.leavenworth.army.mil/nrs/cgsoc/application/application.as	
Phases 2 and 4: Fax a DA 3838 to LTC Diaz-Hays at	p. You must have an AKO password to enter the site.	
703-325-2392.	F	

Education

Reminder that all education requests must come through the Hospital Educators. The revised LTHET Guidelines will be available on the website. LTHET Board date is: 4-8 October 2004. Contact LTC Diaz-Hays if questions. The next AMEDD Officer Advanced Course is scheduled for: 6 July-3 Sep 04.

Generic Course Selection Program

Information on GCSP is located in our website https://www.perscomonline.army.mil/ophsdan/anc-profdevt.htm

AOC/ASI Producing Courses			
Critical Care Course,	OB-GYN Nursing	Psychiatric-Mental	Perioperative Nursing Course:
Emergency Nursing Course:	Course:*	Health:**	There are still seats available for the 14
Applications for the MAY 04	The 2004 Course Dates	The 2004 Course	March 2004 class. The next class will be 1
Critical Care and Emergency	are: 10 May- 31 Aug	Dates are: 5 Jan- 27	August 2004 through 24 November 2004.
Nursing Courses must be	'04; 13 Sep- 21 Jan 05	Apr '04, 10 May- 31	For any questions, please contact LTC Jane
submitted by 5 December 03.	Contact MAJ (P) Agin at	Aug '04; 13 Sep- 21	Newman at HRC @
Course dates for 2004 are: 18 Jan-	agind@hoffman.army.mil	Jan 05	newmanj@hoffman.army.mil. For current
27 Apr 04; 23 May-31 Aug 04; 26	(please check the website	Contact MAJ (P)	assignment opportunities, visit
Sep 04- 21 Jan 05. POC is LTC	for application due dates)	Agin ASAP:	https://www.perscomonline.army.mil/ophsda
Corulli at HRC,		agind@hoffman.arm	n/anc assignments.htm
corullia@hoffman.army.mil.		<u>y.mil</u> .	

Interested applicants for the above courses need to seek support from their chain of command and submit a DA 3838, a recent HT/WT/APFT memo and a preference statement (for follow on assignment). Please check the AN branch web site at www.perscomonline.army.mil/ophsdan/default.htm (click on professional development) for information on application suspense dates to AN branch or contact LTC Corulli, corullia@hoffman.army.mil or MAJ(P) Agin at agind@hoffman.army.mil.

*(66G) OB/GYN Duty Locations- This is a list of all the MTF's that have OB/GYN services-please use this list when filling out preference statements: Korea-121 Gen Hospital; Tripler AMC, Hawaii; Heidelberg, Germany; Landstuhl, Germany; Wuerzburg, Germany; Fairbanks, Alaska; Ft Irwin, California; Madigan AMC, Washington; Ft Carson, Colorado; Ft Hood, Texas; Ft Leonard wood, Missouri; Ft Polk, Louisiana; Ft Riley, Kansas; Ft Sill, Oklahoma; William Beaumont AMC, Texas; Ft Belvoir, Virginia; Ft Bragg, North Carolina; Ft Knox, Kentucky; Ft Benning, Georgia; Ft Campbell, Kentucky; and Ft Stewart, Georgia

**(66C) Psychiatric Mental Health Nurse Duty Locations- This is a list of all the MTF's that have inpatient psychiatric services-please use this list when filling out preference statements: Korea-121 Gen Hospital; Tripler AMC, Hawaii; Landstuhl, Germany; Wuerzburg, Germany; Madigan AMC, Washington; Ft Hood, Texas; Ft Leonard wood, Missouri; William Beaumont AMC, Texas; Walter Reed AMC, D.C.; Ft Bragg, North Carolina; Dwight David Eisenhower AMC, Ft Gordon, Georgia; Ft Benning, Georgia; Ft Jackson, South Carolina and Ft Stewart, Georgia

Community Health Nursing Course Dates

6H-F9 STD Intervention Course (pre-requiste for the 6A-F5 Course): * 6 Sep- 5 Nov 04 6 Sep- 5 Nov 04

6A-F5 Principles of Military Preventive Medicine:

Contact MAJ (P) Agin at: agind@hoffman.army.mil. Please see your facility's Nursing Education Representative or nursing chain of command if you are interested in attending. Please note FY03 AOC/ASI Course dates are listed at

https://www.perscomonline.army.mil/ophsdan/anc/profdevt.htm Also note that 6H-F9 is now two phases, with Phase One needing to be completed prior to applying to Phase Two. For information visit the website https://www.cs.amedd.army.mil/dphs/CHP/index.html

66H Lieutenants:

Assignment opportunities available for 66H Lieutenants include WBAMC El Paso, TX; 115th Field Hospital, Fort Polk, LA; Ft Sill, OK; Ft Riley, KS; 121 General Hospital, and Korea. Army Medical Center positions are available for winter/summer 2004. I can negotiate follow on assignments for officers that volunteer to select locations, i.e. Korea. If interested, please contact LTC Corulli, corullia@hoffman.army.mil

Assignment Opportunities

HOT! HOT! HOT!

66E - Heidelberg, Germany - Summer 2004.

66F – Ft. Hood, summer 04 47th CSH, Ft. Lewis, WA, now. Korea, summer 2004.

Follow on assignments can be negotiated.

Other assignment opportunities are available for 66Fs and 66Es in a variety of locations. Please check our website at

https://www.perscomonline.army.mil/OPhsdan/anc assignments.htm. Please direct inquiries to LTC Newman, newmanj@hoffman.army.mil.

66B, 66C, 66G, 66G8D	Open Assignments	Contact agind@hoffman.army.mil
AOC	LOCATION	WHEN
66G	LRMC, Heidelberg, Wuerzburg, Alaska, Irwin, and Sill	Summer 04
66G	Heidelberg, Wuerzburg, Alaska and Korea	Winter 05
66G-Head Nurse	Knox, Polk, Bragg, Stewart	Summer 04
66B-C,CHN	WBAMC, MAMC, Huachuca, Polk, Leavenworth, Redstone	Summer 04
66B	Korea, Knox, Germany, Polk, Rucker	Summer 04
66C	Korea, Hood, WBAMC, LRMC and WRAMC	Summer 04
66C7T MAJ(P) or LTC	ISR, Bragg and Hood	Summer 04
66C7T CPT or MAJ	Knox, Jackson, Hood and Polk Summer 04	

Company Grade 66H, 66H8A and 66HM5

*****We must have 100% fill on all TO & E / FORSCOM and Korea slots. This includes Division Nurse slots & CSH slots.

-We have an immediate need for an experienced 66H to deploy to Kuwait for 6 months around May/June. You must have 24 months TOS at your current location.

-Looking for officers to PCS to Fort Irwin NOW and we can negotiate your follow on assignment. We also need a clinically sound 66H to be OIC of the Yuma Clinic at Fort Irwin.

-The 528th Special Ops CMD at Fort Bragg is looking for two high speed officers for FY 2005. If you are interested, please inform your nursing chain and submit your name to branch.

KOREA: We have openings NOW for 66H and 8A positions. We will also need a M5 for Winter FY2005 PCS cycle. We can negotiate your follow on assignment if you take one of the openings in Korea.

GERMANY: We have openings NOW in Heidelberg, 212th MASH, and Wuerzburg for 66Hs, 66H8As and M5s. If you are interested in a clinic position in Heidelberg, please let us know.

FORSCOM: We have openings NOW and summer 2004 at the 67th CSH, 14th FH, 21st CSH, 115th CSH & 86th CSH.

66H: Opportunities exists at WBAMC, DDEAMC, Forts Carson, Leonard Wood, Bragg, Campbell, Rucker, Irwin,

66H8A: Assignment opportunities are at Forts Belvoir, Carson, Leonard Wood, Sill, Hood, Polk, & Riley, WBAMC, and DDEAMC 66HM5: Assignment opportunities are at Fort Hood, Fort Benning, and Fort Stewart, Fort Sill, & Fort Polk

*****Once we identified your assignment, I encourage you to write the Deputy Commander for Nursing/Chief Nurse at the gaining unit to give the leadership a chance to get to know you and what some of your goals and objectives are.

DEPLOYMENTS: If you are due to re-deploy early next year and you are PCS vulnerable for summer 04, we can negotiate/discuss your next assignment and report date. If you are "PCS Vulnerable" for summer 2004, please give me a call or email me so we can discuss your next assignment.

MISC: Thank you for keeping your nursing Chain of Command informed about future PCS moves or your school goals. Your Chain of Command is the approval authority and they are there to give career guidance.

Please call me or email gordonv@hoffman.army.mil.

HOT-HOT-HOT!!! CPT and MAJ 66H, 8A, M5 DIVISION NURSE Positions:

25th ID - Hawaii 2nd ACR - 2d SPT SQDN - Fort Polk 1st MED BDE - 566th ASMC - Fort Hood 2d ID - 296th FSB - Fort Lewis

1st ID - 101st FSB - Fort Riley (Deployed - Intratheater PCS) 62d Med Grp - 549th Med Co - Fort Lewis

1st AD - 125th FSB - Fort Riley $1^{st} \, ID - 299^{th} \, MSB - Wuerzburg$ $782^{nd} \, Division \, slot \, @ \, Fort \, Bragg \, (must \, be \, jump \, qualified)$ $1^{st} \, AD - 501^{st} \, FSB - Freidberg$ $1^{st} \, AD - 47^{th} \, FSB - \, Landsthul$

1st ID – 701st FSB – Wuerzburg (MUST FILL)

If you are interested in being a Division Nurse, please call LTC Gordon or MAJ Ahearne to discuss what this awesome and challenging position entails.

MAJ and CPT(P) 66H, 8A, M5 and all ranks 66P:

Summer 2004 job openings are posted please check the website at:

https://www.perscomonline.army.mil/ophsdan/anc assignments.htm

FORSCOM: Due to current operation tempo all TOE positions are required to be filled at 100%. There are still a variety of critical TOE opportunities available both in FSTs and CSHs.

8A Opportunities

10th CSH Fort Carson 86th CSH Fort Campbell

<u>M5</u>

31st CSH Fort Bliss (Currently Deployed, you would be sent forward to Iraq)

I am looking for someone to fill a 66H MAJ Slot at the 115th Field Hospital at Polk. I can negotiate a follow on assignment for officers that volunteer for select locations, (Fort Irwin and Fort Polk).

*****I have an immediate fill requirement for 66Ps at Fort Leonard Wood and Korea.

I am also looking for a Hem/Onc trained 66H MAJ for head nurse positions at Fort Bliss and Tripler. Thank you all very much for your support!!!!!

MAJ Ahearne: patrick.ahearne@us.army.mil